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FILED
Apr 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000052852 (6)

1. Corporation Name
MATS MANAGEMENT, INC.



Principal Place of Business

2812 NW 35 ST.
MIAMI FL 33142

Mailing Address

2812 NW 35 ST.
MIAMI FL 33142-5269

2. Principal Place of Business

21 5801 BISCAYNE BLVD
Suite, Apt. #, etc.

22

City & State

23 MIAMI, FL

Zip

24 33137

Country

25 US

2a. Mailing Address

26 5801 BISCAYNE BLVD
Suite, Apt. #, etc.

27

City & State

28 MIAMI, FL

Zip

29 33137

Country

30 US

3. Date Incorporated or Qualified

06/20/1996

3a. Date of Last Report

4. FEI Number

65-0689209

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒

Yes

☐

No

9. Name and Address of Current Registered Agent

FILINGS, INC.
3732 NW 16 ST.
FT. LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

81 Name BARRY WASSERSTROM
82 Street Address 5801 BISCAYNE BLVD
83
84 City MIAMI FL 85 Zip Code 33137

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/20/97

12. OFFICERS AND DIRECTORS

TITLE D/P
NAME PALINSKY, ILYA
STREET ADDRESS 2812 NW 35 ST.
CITY-ST-ZIP MIAMI FL 33142

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE VP/D
2.2 NAME SYZMON THOPOSKI
2.3 STREET ADDRESS 2812 NW 35th ST
2.4 CITY-ST-ZIP MIAMI FL 33142

3.1 TITLE S/D
3.2 NAME LINDA STEINBERG
3.3 STREET ADDRESS 2812 NW 35th ST
3.4 CITY-ST-ZIP MIAMI FL 33142

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

4/17/97

CR2E034 (9/96)